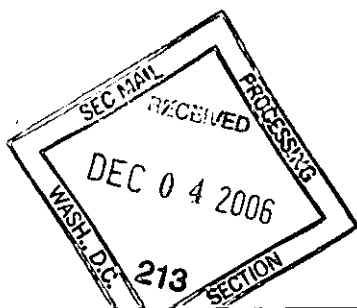


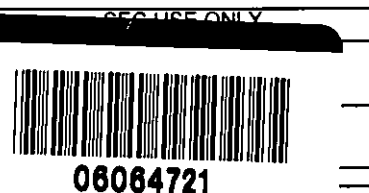
UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

1118743

OMB APPROVAL	
OMB Number:	3235-0076
Expires:	April 30, 2008
Estimated average burden hours per response.....	16.00



FORM D
NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION



Name of Offering (☐ Check if this is an amendment and name has changed, and indicate change.)
D&A Domestic Small Cap Growth Fund III, L.P.

Filing under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ Section 4(6) ☐ ULOE
Type of Filing: ☐ New Filing ☒ Amendment

A. BASIC IDENTIFICATION DATA

1. Enter the information requested about the issuer

Name of Issuer (☒ Check if this is an amendment and name has changed, and indicate change.)
D&A Domestic Small Cap Growth Fund III, L.P.

Address of Executive Offices (Number and Street, City, State, Zip Code)
10251 Vista Sorrento Parkway Suite 200 San Diego CA 92121

Telephone Number (Including Area Code)
619-308-9700

Address of Principal Business Operations (If different from Executive Offices)
(Number and Street, City, State, Zip Code)

Telephone Number (Including Area Code)

Brief Description of Business: A California limited partnership formed to invest primarily in equities, bonds, and cash.

Type of Business Organization

☐ corporation ☒ limited partnership, already formed ☐ other (please specify):
☐ business trust ☐ limited partnership, to be formed

PROCESSED

DEC 20 2006

THOMSON
FINANCIAL

Actual or Estimated Date of Incorporation or Organization: MONTH YEAR ☐ Actual ☒ Estimated
0 1 9 7

Jurisdiction of Incorporation of Organization: (Enter two-letter U.S. Postal Service abbreviation for state:
CN for Canada; FN for other foreign jurisdiction)

CA

GENERAL INSTRUCTIONS

FEDERAL:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C 77 d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any Copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a State requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number

A.BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- i. Each promoter of the issuer, if the issuer has been organized within the past five years;
- ii. Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- iii. Each executive officer and director of corporate issuers and of corporate general managing partners of partnership issuers; and
- iv. Each general and managing partner of partnership issuers.

Check Box(es) that apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☒ General and /or Managing Partner

Full Name(Last name first, if Individual)

Dunham & Associates Securities, Inc.

Business or Residence Address (Number and Street, City,State ,Zip Code)

10251 Vista Sorrento Parkway,Suite 200 San Diego CA 92121

Check Box(es) that apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☐ Director ☐ General and /or Managing Partner

Full Name(Last name first, if Individual)

Dunham Jeffrey A

Business or Residence Address (Number and Street, City,State ,Zip Code)

10251 Vista Sorrento Parkway,Suite 200 San Diego CA 92121

Check Box(es) that apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☐ Director ☐ General and /or Managing Partner

Full Name(Last name first, if Individual)

Iverson Denise

Business or Residence Address (Number and Street, City,State ,Zip Code)

10251 Vista Sorrento Parkway,Suite 200 San Diego CA 92121

B. INFORMATION ABOUT OFFERING

Yes No

1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?.....

☐ ☒

Answer also in Appendix, Column 2, if filing under ULOE.

2. What is the minimum investment that will be accepted from any individual?.....

\$ **\$ 250,000.00**

Yes No

3. Does the offering permit joint ownership of a single unit?.....

☐ ☐

4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchases in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and /or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.

Full Name (Last name first, if individual) **H-Beck, Inc.**

Business or Residence Address (Number and Street, City, State, Zip Code)

11140 Rockville Pike-400, Rockville,MD 20852

Name of Associated Broker or Dealer

H. Beck, Inc.

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States or check individual States).....

☐ All States

[AL] ☐ [AK] ☐ [AZ] ☐ [AR] ☐ [CA] ☐ [CO] ☐ [CT] ☐ [DE] ☐ [DC] ☐ [FL] ☐ [GA] ☐ [HI] ☐ [ID] ☐
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[MT] ☐ [NE] ☐ [NV] ☐ [NH] ☐ [NJ] ☐ [NM] ☐ [NY] ☐ [NC] ☐ [ND] ☐ [OH] ☐ [OK] ☐ [OR] ☐ [PA] ☐
[RI] ☐ [SC] ☐ [SD] ☐ [TN] ☐ [TX] ☐ [UT] ☐ [VT] ☐ [VA] ☐ [WA] ☐ [WV] ☐ [WI] ☐ [WY] ☐ [PR] ☐

Full Name (Last name first, if individual) **OMNI Brokerage, Inc.**

Business or Residence Address (Number and Street, City, State, Zip Code)

10542 S. Jordan Gateway, Suite 330,Salt Lake City,UT 84095

Name of Associated Broker or Dealer

OMNI Brokerage, Inc.

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States or check individual States).....

☐ All States

[AL] ☐ [AK] ☐ [AZ] ☐ [AR] ☐ [CA] ☐ [CO] ☐ [CT] ☐ [DE] ☐ [DC] ☐ [FL] ☐ [GA] ☐ [HI] ☐ [ID] ☐
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Full Name (Last name first, if individual) **G.A.Repple & Company**

Business or Residence Address (Number and Street, City, State, Zip Code)
101 Normandy Rd., Suite 101, Casselberry, FL 32707

Name of Associated Broker or Dealer
G.A. Repple & Company

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States or check individual States).....

☐ All States

[AL] ☐ [AK] ☐ [AZ] ☐ [AR] ☐ [CA] ☐ [CO] ☐ [CT] ☐ [DE] ☐ [DC] ☐ [FL] ☐ [GA] ☐ [HI] ☐ [ID] ☐
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Full Name (Last name first, if individual) **Financial West Group**

Business or Residence Address (Number and Street, City, State, Zip Code)
2663 Townsgate Rd., Westlake Villag, CA 91361

Name of Associated Broker or Dealer
Financial West Group

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States or check individual States).....

☐ All States

[AL] ☐ [AK] ☐ [AZ] ☐ [AR] ☐ [CA] ☐ [CO] ☐ [CT] ☐ [DE] ☐ [DC] ☐ [FL] ☐ [GA] ☐ [HI] ☐ [ID] ☐
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Full Name (Last name first, if individual) **First Montauk Securities Corp.**

Business or Residence Address (Number and Street, City, State, Zip Code)
328 Newman Springs Rd., Red Bank, NJ 07701

Name of Associated Broker or Dealer
First Montauk Securities Corp.

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States or check individual States).....

☐ All States

[AL] ☐ [AK] ☐ [AZ] ☐ [AR] ☐ [CA] ☐ [CO] ☐ [CT] ☐ [DE] ☐ [DC] ☐ [FL] ☐ [GA] ☐ [HI] ☐ [ID] ☐
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Full Name (Last name first, if individual) **Girard Securities, Inc.**

Business or Residence Address (Number and Street, City, State, Zip Code)

6165 Greenwich Drive, Suite 150, San Diego, CA 92122

Name of Associated Broker or Dealer

Girard Securities, Inc.

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States or check individual States).....

☐ All States

[AL] ☐ [AK] ☐ [AZ] ☐ [AR] ☐ [CA] ☐ [CO] ☐ [CT] ☐ [DE] ☐ [DC] ☐ [FL] ☐ [GA] ☐ [HI] ☐ [ID] ☐
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Full Name (Last name first, if individual) **Sigma Financial Corporation**

Business or Residence Address (Number and Street, City, State, Zip Code)

4261 Park Road, Ann Arbor, MI 48103

Name of Associated Broker or Dealer

Sigma Financial Corporation

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States or check individual States).....

☐ All States

[AL] ☐ [AK] ☐ [AZ] ☐ [AR] ☐ [CA] ☐ [CO] ☐ [CT] ☐ [DE] ☐ [DC] ☐ [FL] ☐ [GA] ☐ [HI] ☐ [ID] ☐
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Full Name (Last name first, if individual) **Medallion Investment Services, Inc.**

Business or Residence Address (Number and Street, City, State, Zip Code)

811 Governor Richie HWY, Suite 25, Severna Park, MD 21146

Name of Associated Broker or Dealer

Medallion Investment Services, Inc.

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States or check individual States).....

☐ All States

[AL] ☐ [AK] ☐ [AZ] ☐ [AR] ☐ [CA] ☐ [CO] ☐ [CT] ☐ [DE] ☐ [DC] ☐ [FL] ☐ [GA] ☐ [HI] ☐ [ID] ☐
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Full Name (Last name first, if individual) **The Seidler Companies Incorporated**

Business or Residence Address (Number and Street, City, State, Zip Code)

515 South Figueroa St., Suite 1100, Los Angeles, CA 90071

Name of Associated Broker or Dealer

The Seidler Companies Incorporated

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States or check individual States).....

☐ All States

[AL] ☐ [AK] ☐ [AZ] ☐ [AR] ☐ [CA] ☐ [CO] ☐ [CT] ☐ [DE] ☐ [DC] ☐ [FL] ☐ [GA] ☐ [HI] ☐ [ID] ☐
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Full Name (Last name first, if individual) **Centaurus Financial, Inc.**

Business or Residence Address (Number and Street, City, State, Zip Code)

333 City Blvd West, Suite 2010, Orange, CA 92868

Name of Associated Broker or Dealer

Centaurus Financial, Inc.

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States or check individual States).....

☐ All States

[AL] ☐ [AK] ☐ [AZ] ☐ [AR] ☐ [CA] ☐ [CO] ☐ [CT] ☐ [DE] ☐ [DC] ☐ [FL] ☐ [GA] ☐ [HI] ☐ [ID] ☐
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Full Name (Last name first, if individual) **QA3 Financial Corp.**

Business or Residence Address (Number and Street, City, State, Zip Code)

One Valmont Plaza, 4th Fl., Omaha, NE 68154

Name of Associated Broker or Dealer

QA3 Financial Corp.

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States or check individual States).....

☐ All States

[AL] ☐ [AK] ☐ [AZ] ☐ [AR] ☐ [CA] ☐ [CO] ☐ [CT] ☐ [DE] ☐ [DC] ☐ [FL] ☐ [GA] ☐ [HI] ☐ [ID] ☐
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Full Name (Last name first, if individual) **American Investors Company**

Business or Residence Address (Number and Street, City, State, Zip Code)

2682 Bishop Drive, Suite 123, San Ramon, CA 94583

Name of Associated Broker or Dealer

American Investors Company

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States or check individual States).....

☐ All States

[AL] ☐ [AK] ☐ [AZ] ☐ [AR] ☐ [CA] ☐ [CO] ☐ [CT] ☐ [DE] ☐ [DC] ☐ [FL] ☐ [GA] ☐ [HI] ☐ [ID] ☐
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Full Name (Last name first, if individual) **United Planners Financial Services of America**

Business or Residence Address (Number and Street, City, State, Zip Code)

7333 E. Doubletree Ranch Road, Suite 120, Scottsdale, AZ 85258

Name of Associated Broker or Dealer

United Planners Financial Services of America

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States or check individual States).....

☐ All States

[AL] ☐ [AK] ☐ [AZ] ☐ [AR] ☐ [CA] ☐ [CO] ☐ [CT] ☐ [DE] ☐ [DC] ☐ [FL] ☐ [GA] ☐ [HI] ☐ [ID] ☐
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Full Name (Last name first, if individual) **Dunham & Associates Investment Counsel, Inc.**

Business or Residence Address (Number and Street, City, State, Zip Code)

10251 Vista Sorrento Parkway, Suite 200, San Diego, CA 92121

Name of Associated Broker or Dealer

Dunham & Associates Investment Counsel, Inc.

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States or check individual States).....

☐ All States

[AL] ☐ [AK] ☐ [AZ] ☐ [AR] ☐ [CA] ☐ [CO] ☐ [CT] ☐ [DE] ☐ [DC] ☐ [FL] ☐ [GA] ☐ [HI] ☐ [ID] ☐
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Full Name (Last name first, if individual) **AFA Financial Group, LLC**

Business or Residence Address (Number and Street, City, State, Zip Code)

26637 W. Agoura Rd., Calabasas, CA 91302

Name of Associated Broker or Dealer

AFA Financial Group, LLC

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States or check individual States).....

☐ All States

[AL] ☐ [AK] ☐ [AZ] ☐ [AR] ☐ [CA] ☐ [CO] ☐ [CT] ☐ [DE] ☐ [DC] ☐ [FL] ☐ [GA] ☐ [HI] ☐ [ID] ☐
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Full Name (Last name first, if individual) **Ferris, Baker Watts Incorporated**

Business or Residence Address (Number and Street, City, State, Zip Code)

1700 Pennsylvania Ave. NW, Suite 700, Washington, DC 20006-3796

Name of Associated Broker or Dealer

Ferris, Baker Watts Incorporated

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States or check individual States).....

☐ All States

[AL] ☐ [AK] ☐ [AZ] ☐ [AR] ☐ [CA] ☐ [CO] ☐ [CT] ☐ [DE] ☐ [DC] ☐ [FL] ☐ [GA] ☐ [HI] ☐ [ID] ☐
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Full Name (Last name first, if individual) **FMN Capital Corporation**

Business or Residence Address (Number and Street, City, State, Zip Code)

24411 Ridge Route No.220, Laguna Hills, CA 92653-1698

Name of Associated Broker or Dealer

FMN Capital Corporation

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States or check individual States).....

☐ All States

[AL] ☐ [AK] ☐ [AZ] ☐ [AR] ☐ [CA] ☐ [CO] ☐ [CT] ☐ [DE] ☐ [DC] ☐ [FL] ☐ [GA] ☐ [HI] ☐ [ID] ☐
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Full Name (Last name first, if individual) **Gunnallen Financial, Inc.**

Business or Residence Address (Number and Street, City, State, Zip Code)

5002 W. Waters, Tampa, FL 33634

Name of Associated Broker or Dealer

Gunnallen Financial, Inc.

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States or check individual States).....

☐ All States

[AL] ☐ [AK] ☐ [AZ] ☐ [AR] ☐ [CA] ☐ [CO] ☐ [CT] ☐ [DE] ☐ [DC] ☐ [FL] ☐ [GA] ☐ [HI] ☐ [ID] ☐
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Full Name (Last name first, if individual) **Independent Financial Group, LLC**

Business or Residence Address (Number and Street, City, State, Zip Code)

7425 Mission Valley Road, Suite 203, San Diego, CA 92108

Name of Associated Broker or Dealer

Independent Financial Group, LLC

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States or check individual States).....

☐ All States

[AL] ☐ [AK] ☐ [AZ] ☐ [AR] ☐ [CA] ☐ [CO] ☐ [CT] ☐ [DE] ☐ [DC] ☐ [FL] ☐ [GA] ☐ [HI] ☐ [ID] ☐
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Full Name (Last name first, if individual) **Pacific West Securities, Inc.**

Business or Residence Address (Number and Street, City, State, Zip Code)

One Renton Pl., 555 S. Renton Village Pl Renton, WA 98055

Name of Associated Broker or Dealer

Pacific West Securities, Inc.

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States or check individual States).....

☐ All States

[AL] ☐ [AK] ☐ [AZ] ☐ [AR] ☐ [CA] ☐ [CO] ☐ [CT] ☐ [DE] ☐ [DC] ☐ [FL] ☐ [GA] ☐ [HI] ☐ [ID] ☐
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Full Name (Last name first, if individual) **Sicor Securities Inc**

Business or Residence Address (Number and Street, City, State, Zip Code)

8141 N Main Street, Dayton, OH 45415-1747

Name of Associated Broker or Dealer

Sicor Securities Inc

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

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Full Name (Last name first, if individual) **Allegheny Investment, Ltd.**

Business or Residence Address (Number and Street, City, State, Zip Code)

811 Camp Horne Road, Suite 100 Pittsburgh, PA 15237

Name of Associated Broker or Dealer

Allegheny Investments, Ltd.

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

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Full Name (Last name first, if individual) **Butler Freeman Tally Financial Group, LLC**

Business or Residence Address (Number and Street, City, State, Zip Code)

2312 School Lane Bedford, TX 76021

Name of Associated Broker or Dealer

Butler Freeman Tally Financial Group, LLC

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

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Full Name (Last name first, if individual) **Synergy Investment Group, LLC**

Business or Residence Address (Number and Street, City, State, Zip Code)

1660 Dale Earnhardt BLVD. Kannapolis, NC 28083

Name of Associated Broker or Dealer

Synergy Investment Group, LLC

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States or check individual States).....

☐ All States

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Full Name (Last name first, if individual) **Transam Securities, INC.**

Business or Residence Address (Number and Street, City, State, Zip Code)

1111 Douglas Avenue Altamonte Sprin, FL 32714

Name of Associated Broker or Dealer

Transam Securities, INC.

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

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Full Name (Last name first, if individual) **USA Financial Securities Corporation**

Business or Residence Address (Number and Street, City, State, Zip Code)

6020 East Fulton Ada, MI 49301

Name of Associated Broker or Dealer

USA Financial Securities Corporation

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

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Full Name (Last name first, if individual) **Sammons Securities Company LLC**

Business or Residence Address (Number and Street, City, State, Zip Code)

4261 PARK ROAD ANN ARBOR, MI 48103

Name of Associated Broker or Dealer

Sammons Securities Company LLC

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States or check individual States).....

☐ All States

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Full Name (Last name first, if individual) **Waterstone Financial Group, Inc.**

Business or Residence Address (Number and Street, City, State, Zip Code)

500 PARK BLVD SUITE 800 ITASCA, IL 60143

Name of Associated Broker or Dealer

Waterstone Financial Group, Inc.

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States or check individual States).....

☐ All States

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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold.

Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, check this box ☐ and

Indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

Type of Security	Aggregate offering price	Amount Already Sold
Debt.....	\$ _____	\$ _____
Equity.....	\$ _____	\$ _____
<input type="checkbox"/> Common <input type="checkbox"/> Preferred		
Convertible Securities(including warrants).....	\$ _____	\$ _____
Partnership Interests.....	\$ <u>\$100,000,000.00</u>	\$ <u>\$49,741,125.68</u>
Other(Specify _____).....	\$ _____	\$ _____
Total.....	\$ <u>\$100,000,000.00</u>	\$ <u>\$49,741,125.68</u>

Answer also in Appendix, Column 3, if filing under ULOE

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero".

	Number of Investors	Aggregate Dollar Amount of Purchases
Accredited Investors.....	<u>66</u>	\$ <u>\$49,741,125.68</u>
Non-accredited Investors.....	_____	\$ _____
Total(for filing under Rule 504 only).....	_____	\$ _____

Answer also in Appendix, Column 4, if filing under ULOE

3. If this filing is for an offering under Rule 504 Or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve(12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.

Type of offering	Type of securities	Dollar Amount Sold
Rule 505.....	_____	\$ _____
Regulation A.....	_____	\$ _____
Regulation 504.....	_____	\$ _____
Total.....	_____	\$ _____

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees.....	<input checked="" type="checkbox"/>	\$0.00
Printing and Engraving Costs.....	<input checked="" type="checkbox"/>	\$1,000.00
Legal Fees.....	<input checked="" type="checkbox"/>	\$4,000.00
Accounting Fees.....	<input checked="" type="checkbox"/>	\$0.00
Engineering Fees.....	<input checked="" type="checkbox"/>	\$0.00
Sales Commissions (specify finders' fees separately).....	<input checked="" type="checkbox"/>	\$1,000,000.00
Other Expenses(Identify).....	<input checked="" type="checkbox"/>	\$0.00
Total.....	<input checked="" type="checkbox"/>	\$1,005,000.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

b. Enter the difference between the aggregate offering price given in response to Part C- Question 1 and total expenses furnished in response to Part C- Question 4.a. This difference is the "adjusted gross proceeds to the issuer.".....

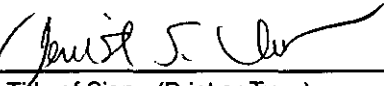
\$ \$98,995,000.00

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C- Question 4.b.above.

		Payments to Officers, Directors, & Affiliates		Payments to Others
Salaries and fees.....	<input checked="" type="checkbox"/> \$	<u>\$430,000.00</u>	<input checked="" type="checkbox"/> \$	<u>\$760,000.00</u>
Purchase of real estate.....	<input checked="" type="checkbox"/> \$	<u>\$0.00</u>	<input checked="" type="checkbox"/> \$	<u>\$0.00</u>
Purchase, rental or leasing and installation of machinery and equipment.....	<input checked="" type="checkbox"/> \$	<u>0</u>	<input checked="" type="checkbox"/> \$	<u>\$0.00</u>
Construction or leasing of plant buildings and facilities.....	<input checked="" type="checkbox"/> \$	<u>\$0.00</u>	<input checked="" type="checkbox"/> \$	<u>\$0.00</u>
Acquisition of other business (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger).....	<input checked="" type="checkbox"/> \$	<u>\$0.00</u>	<input checked="" type="checkbox"/> \$	<u>\$0.00</u>
Repayment of indebtedness.....	<input checked="" type="checkbox"/> \$	<u>\$0.00</u>	<input checked="" type="checkbox"/> \$	<u>\$0.00</u>
working capital.....	<input checked="" type="checkbox"/> \$	<u>\$97,805,000.00</u>	<input checked="" type="checkbox"/> \$	<u>\$0.00</u>
Other(specify): _____				
_____	<input checked="" type="checkbox"/> \$	<u>\$0.00</u>	<input checked="" type="checkbox"/> \$	<u>\$0.00</u>
Column Totals.....	<input checked="" type="checkbox"/> \$	<u>\$98,235,000.00</u>	<input checked="" type="checkbox"/> \$	<u>\$760,000.00</u>
Total Payments Listed(column totals added).....			<input checked="" type="checkbox"/> \$	<u>\$98,995,000.00</u>

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer(Print or Type) D&A Domestic Small Cap Growth Fund III, L.P.	Signature 	Date 11/1/2006
Name of Signer(Print or Type) Denise Iverson	Title of Signer(Print or Type) Chief Financial Officer	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C.1001.

E. STATE SIGNATURE

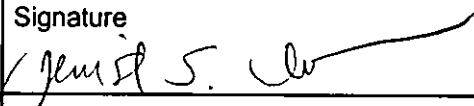
1. Is any party described in 17 CFR 230.262 presently subject to any disqualification provisions of such rule?.....

Yes No
☐ ☒

See Appendix, Column 5, for state response

2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D(17 CFR 239.500) at such times as required by state law.
3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption(ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer(Print or Type) D&A Domestic Small Cap Growth Fund III, L.P.	Signature 	Date 11/1/2006
Name(Print or Type) Denise Iverson	Title(Print or Type) Chief Financial Officer	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1 State	2 Intend to sell to non-accredited investors in State		3 Type of Security and aggregate offering price offered in state	4 Type of investor and amount purchased in State				5 Disqualification under State ULOE (if yes, attach explanation of waiver grated)	
	Yes	No	Partnership Interests \$ 100,000,000.00	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA		X		45	9,794,805.31				X
CO									
CT		X		1	\$ 50,000.00				X
DE									
DC									
FL		X		1	\$ 259,623.65				X
GA									
HI									
ID									
IL									
IN									
IA									
KS									
KY									
LA									
ME									
MD									
MA		X		4	\$ 118,544.28				X
MI									
MN									
MS									
MO									

APPENDIX

1	2		3	4				5	
	Intend to sell to non-accredited investors in State		Type of Security and aggregate offering price offered in state	Type of investor and amount purchased in State				Disqualification under State ULOE (if yes, attach explanation of waiver graded)	
State	Yes	No	Partnership Interests \$ 100,000,000.00	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
MT		X		1	\$ 61,970.38				X
NE									
NV		X		10	36,984,516.0				X
NH									
NJ									
NM									
NY									
NC									
ND									
OH									
OK									
OR									
PA		X		1	\$ 300,000.00				X
RI									
SC									
SD									
TN									
TX									
UT									
VT									
VA		X		1	\$ 107,479.48				X
WA									
WV									
WI									
WY									
PR									

Foreign Investments total \$